FAP 2022 SUMMER MEETING - REGISTRATION FORM

August 12-13, 2022 • Margaritaville Resort Orlando

Name	Email
Address	
City	State Zip Telephone
	– EARLY REGISTER FEES –
	I am a member of the FAP. No fee for Dr. Scott Froum/Corporate Forums/FAP Business Meeting & Luncheon.
	I am a retired FAP member: \$50.00 registration fee includes Dr. Scott Froum/Corporate Forums/FAP Business Meeting & Luncheon.
	Non-member periodontists: \$300.00 includes Dr. Scott Froum/Corporate Forums/FAP Business Meeting & Luncheon.
	Referring Dentists (must attend with an FAP Member) \$200.00 – includes Dr. Scott Froum/Corporate Forum/FAP Business Meeting Luncheon
	Name of Referring Dentists:
	All Dental Team Members (non-dentists, non-periodontists) \$35.00 – includes Dr. Scott Froum/Corporate Forums – <i>Lunch on their own</i> . Name of Team Members:
	Late Registration Fees from August 9-13, 2022 – Add \$50.00 to above fee schedule.
	YES, I will be attending Procedural Sedation in Dental Practice, Dr. Daniel Becker Friday, August 12th. FAP Member \$175.00; Non-Member \$325.00; FAP Member Staff \$40.00; Non-Member Staff \$90.00
	List staff below and designation (i.e. dental assistant):
	*Staff is defined as: Dental Assistant, R.D.H., Office Manager, and other support personnel and does not include dentists/periodontists.
	YES, I will be attending the FAP Welcome Reception on Friday, August 12th, 5:00 p.m.
	YES, I will be attending the Business Meeting Lunch Saturday, August 13th, 12:30 p.m. – 1:30 p.m. Only those indicating by checking above will be given a lunch ticket. Please, if you commit to attending lunch, we ask that you do stay for the luncheon and business meeting.
	If you need a vegetarian option for Saturday luncheon check here: 🔲 Please, no last-minute requests the day of the business meeting lunch
Return	Registration Form to:
	Florida Association of Periodontists • P.O. Box 7075 • Wesley Chapel, FL 33545 Visa, MasterCard, Discover and American Express are now accepted — Checks payable to FAP. Questions: (352) 232-6800 or email: fap@tampabay.rr.com Fax: (813) 388-6098
Using a	Credit Card? Please provide the following information:
Name or	n card:
	☐ MasterCard ☐ Discover ☐ American Express
Card bill	ing address (street number/zip):
Card Nu	mber:
Expiratio	on Date: / CVV Code:
Signatur	e:

PREVENTATIVE MEASURES AIMED AT REDUCING THE SPREAD OF COVID-19 WILL BE IN PLACE AT THE FAP WINTER MEETING, HOWEVER IT IS NOT POSSIBLE TO FULLY ELIMINATE THE RISK. BY REGISTERING FOR THE FAP ALL ATTENDEES AND GUESTS VOLUNTARILY ASSUME ALL RISKS OF EXPOSURE TO COVID-19.